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FROM: John F. Salazar, Reg. No, 39,353

DATE: February 15, 2005

PAGES: 20 in total (including cover sheet)

RE: U.S. Patent Application No. 10/020,811
Attorney Docket No.: ZK988/02014

Remarks: This facsimile is a response to an office action having a mailing date of October 14, 2004.

Enclosed is:

- (1) Transmittal Form;
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/020,811 |
| | Filing Date | 12/12/2001 |
| | First Named Inventor | GASKINS |
| | Art Unit | 2875 |
| | Examiner Name | PAYNE |
| | Attorney Docket Number | ZK888/02014 |
| Total Number of Pages in This Submission | | |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FACSIMILE TRANSMITTAL FORM |
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